Kaibab Band of Paiute Indians Self-Development Policy

The Self-Development monies will be specifically set aside each fiscal year for Tribal members who are non-degree seeking students and would like to take one self-enrichment course per calendar year. Self Development money is to assist with course related expenses. All applications submitted to the Tribal Education Director will be reviewed for completeness of application and determination of eligibility then presented to the Education Committee at the next Education Committee Meeting. Self Development funds are considered part of the whole Tribe Education budget.

Eligibility:

- Be an enrolled member of the Kaibab Band of Paiute Indians 16 years of age or older
- Students under the age of 18 need to have parent/guardian signature on Application.
- Make presentation to committee in person, if extenuating circumstances exist the
 applicant may elect to instead present their application via video conference, over the
 phone or prerecorded video.)
- Applicant must currently be in good standing with all tribal education funding sources.

Student Requirements:

- Must submit complete application
- Student must submit a 250 word essay detailing why they are applying for Self-Development funding
- Student must provide proof of cost and course registration documentation.
- Student must complete course and submit passing grade of 2.0 or certificate of completion.
- If the student fails to complete approved course within approved timeline ALL funds must be paid back.

Funding:

- Funding for Self Development courses will be from non-judgment funding sources.
- The maximum funding is up to \$600.00 per calendar year.

Allowable Expenses:

- Tuition
- Books
- Class related equipment

Non-Allowable Expenses:

Lodging, Meals and Incidentals, gas, car rental...

Education Department
HC 65 box 2
Pipe Springs, AZ 86022
Phone: (928) 643-6025 Fax: (928) 286-8311
Website: kaibabpaiute-nsn.gov

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Application for Self Development Funding

Student's Name:			Census Number:	
Home Phone:	Cell Phone:		Email:	
Student's Mailing Address:				
-	City		State	Zip Code
	Course Inf	ormation	1	
School Attending:			Course:	
	Tuition/fees Books/Supplies Equipment	\$ \$ \$		- - -
	TOTAL EXPENSE:	\$		_
I hereby certify that the mo	nies received will be	used sole	ely for educat	ion and related purposes.
Student's Signature		Date		
Parent/Guardian Signature				

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Student Agreement

I declare that I will use any funds I received under the Department's Self Development Program solely for eat:	
Also, I agree to abide by the policies presented to me Grade Point Average of 2.0 and successfully complet so could result in termination of future funding from funding sources. I understand I will be required to re complete approved course within approved timeline will result in the Education Department filing in Triba payments as well as filing fees and court costs.	e the approved course/class. Failure to do the Kaibab Paiute Education Department epay ALL funds within one (1) year if I fail to . Failure to repay funds within one (1) year
I,, have read the what is expected of me while utilizing Self Developm	
Student Signature	Date
Parent/Guardian Signature	<u> </u>